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APPLICANTS

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** CONTINUING DATA ***** *None A.S.*

** FOREIGN APPLICATIONS ***** *None A.S.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/19/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after		
Verified and Acknowledged	<i>John A.S.</i> <i>A.S.</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
TX	23	21 18	3

ADDRESS

35525

TITLE

Method and apparatus for identifying false cache line sharing

FILING FEE RECEIVED 788	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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